

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.:	D3050
	First Inventor:	Wang
	Title:	FREQUENCY COEFFICIENT SCANNING PATHS FOR CODING DIGITAL VIDEO CONTENT
	Express Mail Label No.:	EV317210267 US

100603
22389
10/6/03

APPLICATION ELEMENTS <small>(see MPEP chapter 600 concerning utility patent application contents)</small>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>217</u>] (<i>preferred arrangement set forth below</i>) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D -Reference to sequence listing, a table, or computer program listing appendix -Brief Summary of the Invention -Brief Description of the Drawings (<i>if filed</i>) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>9</u>]</p> <p>5. Oath or Declaration [Total Sheets <u> </u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) of prior application No. _____ <i>Prior application information:</i> <i>Examiner:</i> _____ <i>Art Unit:</i> _____</p>		
<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CFR)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); or ii. <input type="checkbox"/> Paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>		
ACCOMPANYING APPLICATION PARTS		
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (<i>when there is an assignee</i>)</p> <p>11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PT-1449 Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (<i>Should be specifically itemized</i>)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>		

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) of prior application No. _____ <i>Prior application information:</i> <i>Examiner:</i> _____ <i>Art Unit:</i> _____	
<p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>	

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number				or <input type="checkbox"/> Correspondence address below	
Name	Motorola, Inc.				
Address	101 Tournament Drive				
City	Horsham	State	PA	Zip Code	19044
Country	USA	Telephone	215-323-1797	Fax	215-323-1300
Name	Caroline Coker			Registration No.	50,516
SIGNATURE			Date	October 6, 2003	

17707
10/30/03**FEE****TRANSMITTAL**

Patent fees are subject to annual revision

Applicant claims small entity status. See 37 CFR 1.27

Complete if Known

Application Number	Unknown
Filing Date	October 6, 2003
First Named Inventor	Wang
Examiner Name	Unknown
Group Art Unit	Unknown

TOTAL AMOUNT OF PAYMENT

(\$ 2928)

Attorney Docket No.

D3050

METHOD OF PAYMENT (check all that apply) Check Credit card Money Order Other None Deposit Account:

Deposit Account Number	502117
Deposit Account Name	Motorola, Inc.

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
- Charge any additional fee(s) during the pendency of this application
- Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late Provisional filing
1053	130	1053	130	Non-English specification
1812	2520	1812	2520	For filing a request for ex parte Reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1480	2254	740	Extension for reply within fourth month
1255	2010	2255	1005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1510	1451	1510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1330	2453	665	Petition to revive - unintentional
1501	1330	2501	665	Utility issue fee (or reissue)
1502	480	2502	240	Design issue fee
1503	640	2503	320	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of IDS
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	770	2809	385	Filing a submission after final
1810	770	2810	385	rejection (37 CFR § 1.129(a)) For each additional invention to be examined (37 CFR § 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application
Other fee (specify) _____				
SUBTOTAL (3) (\$ 0)				

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Paid
1001	770	2001	385	Utility filing fee
1002	340	2002	170	Design filing fee
1003	530	2003	265	Plant filing fee
1004	780	2004	385	Reissue filing fee
1005	160	2005	80	Provisional filing fee

SUBTOTAL (1) (\$ 770)

2. EXTRA CLAIM FEES

Total Claims	Previously Paid**	Extra Claims	Fee from below	Fee Paid
	1 1 6	- 20	= 96	X 18 = 1728
Independent Claims	8	- 3	= 5	X 86 = 430
Multiple Dependent			280	= 0

Large Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	* Reissue independent claims over original patent
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 2158)

**or number previously paid, if greater; For Reissues, see above.

SUBMITTED BY

Name (Print/Type) Caroline Coker

Complete (if applicable)

Registration No. 50,516 Telephone 215-323-1797

Signature

Date October 6, 2003